

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000897

**Entity Name:** THE GREENS II OF ST. AUGUSTINE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 29, 2014**  
**Secretary of State**  
**CC2103444705**

**Current Principal Place of Business:**

461 A1A BEACH BLVD  
SAINT AUGUSTINE, FL 32080

**Current Mailing Address:**

C/O SOVEREIGN & JACOBS PROPERTY MANAGEMENT  
461 A1A BEACH BLVD  
SAINT AUGUSTINE, FL 32080

**FEI Number: 56-2447150**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LUMPKIN, ELLEN  
461 A1A BEACH BLVD  
SAINT AUGUSTINE, FL 32080 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DVP  
Name           DYTRYCH, PETER  
Address        1805 PRESTWICK PLACE  
City-State-Zip: ST. AUGUSTINE FL 32086

Title           DP  
Name           SMITH, GRACE  
Address        1409 CARNOUSTIE COURT  
City-State-Zip: ST. AUGUSTINE FL 32086

Title           TREASURER  
Name           BERG, CARL  
Address        6634 WESTON CIRCLE W  
City-State-Zip: DUBLIN OH 43016

Title           DIRECTOR  
Name           JOHNSON, STANLEY  
Address        461 A1A BEACH BLVD.  
City-State-Zip: ST. AUGUSTINE FL 32080

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: GRACE SMITH**

**PRESIDENT**

**01/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date